

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>2/5/07</u>		2 Serial/Patent # <u>10/617,544</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
<input type="checkbox"/>	Filing			\$							
<input type="checkbox"/>	Amendment			\$							
<input type="checkbox"/>	Extension of Time			\$							
<input type="checkbox"/>	Notice of Appeal/Appeal			\$							
<input checked="" type="checkbox"/>	Petition	<u>None</u>	<u>11/24/03</u>	\$ <u>130.00</u>							
<input type="checkbox"/>	Issue			\$							
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$							
<input type="checkbox"/>	Maintenance			\$							
<input type="checkbox"/>	Assignment			\$							
<input type="checkbox"/>	Other			\$							
		7 TOTAL AMOUNT OF REFUND		\$ <u>130.00</u>							
		8 TO BE REFUNDED BY:									
10 REASON:		Treasury Check									
<input type="checkbox"/> Overpayment											
<input type="checkbox"/> Duplicate Payment		Credit Deposit A/C #:									
<input checked="" type="checkbox"/> No Fee Due (Explanation):		9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"> <tr> <td>1</td><td>3</td><td>--</td><td>1</td><td>7</td><td>0</td><td>3</td> </tr> </table>			1	3	--	1	7	0	3
1	3	--	1	7	0	3					
<u>PTO lost the paper</u>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>Paul Shanowski</u>		TITLE: <u>Attorney</u>									
SIGNATURE: <u>Paul Shanowski</u>		PHONE: <u>305-0011</u>									
OFFICE: <u>Office of Patents</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u>[Signature]</u>		DATE: <u>3/1/04</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: